

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ANTHONY PORTANTINO CONGRESSIONAL EXPLORATORY COMMITTEE

ADDRESS (number and street)

249 E. Ocean Blvd. Ste. 685

Check if different
than previously
reported. (ACC)

Long Beach

CA

90802

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C

C00479188

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

CA

26

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2015

through

M M / D D / Y Y Y Y
06 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David L. Gould

Signature of Treasurer

David L. Gould

[Electronically Filed]

Date

M M / D D / Y Y Y Y
07 / 13 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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Write or Type Committee Name

ANTHONY PORTANTINO CONGRESSIONAL EXPLORATORY COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2015

To:

M M / D D / Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	0.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	0.00	0.00
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	0.00
8. Cash on Hand at Close of Reporting Period (from Line 27)	6079.86	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	275000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	25000.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

ANTHONY PORTANTINO CONGRESSIONAL EXPLORATORY COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y
04 / 01 / 2015

To:

M M / D D / Y Y Y Y
06 / 30 / 2015

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL of contributions from individuals ▶

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES**13. LOANS:**

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)**15. OTHER RECEIPTS (Dividends, Interest, etc.)****16. TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	0.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	275000.00	275000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	275000.00	275000.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	279216.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1862.90
25. SUBTOTAL (add Line 23 and Line 24).....	281079.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	275000.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6079.86

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 11

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ANTHONY PORTANTINO CONGRESSIONAL EXPLORATORY COMMITTEE

Full Name (Last, First, Middle Initial)

Edward Jones

Mailing Address 101 Main Street Suite D

City

Seal Beach

State

CA

Zip Code

90740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4387.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		01		2015

Transaction ID : INCA999

Amount of Each Receipt this Period

626.83

Dividend

Full Name (Last, First, Middle Initial)

Edward Jones

Mailing Address 101 Main Street Suite D

City

Seal Beach

State

CA

Zip Code

90740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4387.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		01		2015

Transaction ID : INCA998

Amount of Each Receipt this Period

617.31

Dividend

Full Name (Last, First, Middle Initial)

Edward Jones

Mailing Address 101 Main Street Suite D

City

Seal Beach

State

CA

Zip Code

90740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4387.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		01		2015

Transaction ID : INCA997

Amount of Each Receipt this Period

618.76

Dividend

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1862.90

1862.90

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SB21

Transaction ID : EXPB995

Transfer

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☐ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC996

ANTHONY PORTANTINO CONGRESSIONAL EXPLORATORY COMMITTEE**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Anthony Portantino for Senate 2016

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

249 E. Ocean Blvd. Ste. 685

City

State

ZIP Code

Long Beach

CA

90802

Original Amount of Loan

275000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

275000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 30 / 2015

Date Due

M M / D D / Y Y Y Y
06/30/2016

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

275000.00

TOTALS This Period (last page in this line only)..... ►

275000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB
.

Form/Schedule: SC/9

Transaction ID : RVCV996

Transfer

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☐ 13a
☒ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : PAYC760

ANTHONY PORTANTINO CONGRESSIONAL EXPLORATORY COMMITTEE**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Anthony Portantino

Election: 2012

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

4612 La Canada Blvd.

City

State

ZIP Code

La Canada

CA

91011

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 30 / 2011

Date Due

M M / D D / Y Y Y Y
/ / None

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

TOTALS This Period (last page in this line only)..... ►

25000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : PAYC760

PERSONAL FUNDS

Form/Schedule:

Transaction ID: